Image# 28991193063 05/24/2008 18:37

### **FEC FORM 5**

#### REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

			oo, moraamig aaamii		
		rganization or Corporation			
DEFENDERS OF WILDLIFE ACTION FUND					
(b) Address (number and street)					
	0 17TH ST NW	Greek if different than pix	eviously reported		
(c)	City, State and ZIP C	ode			
WA:	SHINGTON	DC	20036		FEC Identification Number
			20000		<b>C</b> C90007907
2. <b>Co</b> ı	rporate filers only	La tha Claus and PC advances Channel			30000.001
		Is the filer a qualified nonprofit corpo	oration? X Yes	☐ No	
Ind	lividual filers only	Name of Employer		(	Occupation
		rame or Employer			
	4. TYPE OF RE	PORT (check appropriate boxes):			
		, , ,			
	(a) April 1	5 Quarterly Report	X 24-Hour Notice	48-Hour	Notice
		5 Occade de Bornet			
	July 1	5 Quarterly Report			
	Octobe	er Quarterly Report			
	Januar	y 31 Year-End Report			
	(b) Is this Rep	oort an amendment? Yes 🗌 No 🛚	X		
	5. COVERING F	PERIOD: FROM 05 / 2	3 2008		
		0 0	2000		
		THRO	UGH		
		M M / D D D	2008		
			2000		
	6. TOTAL CONT	RIBUTIONS			.00
	0.70.7.200.11				
	7. TOTAL INDE	PENDENT EXPENDITURES			3008.69
	// / 0 // 12 // 12 //				
	-				
request	or suggestion of, a candida	at the independent expenditures reported herein we te or a candidate's agent or authorized committee of rporation, I certify that the corporation is a qualified	or a political party committee or its	s agent. In addition, if	the independent expenditures
TVPF	OR PRINT NAME O	F PERSON COMPLETING FORM	SIGNATUR	F	DATE
	OILLI IIII III III III III III III III I	1 Endon Comi EE ma i Cim	Sidily i Sil	_	DAIL
Willia	ım Lutz				05/24/2008
	NOTE: Submissi	on of false, erroneous or incomplete informa	tion may subject the person	signing this report	to the penalties of 2 U.S.C 437a.
				3 3	

For further information, contact

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

# Image# 28991193064 SCHEDIII F 5\_F

SCHEDULE 5-E	
ITEMIZED INDEPENDENT EXPENDITURES	

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

Full Name (Last, First, Middle Initial) of Payee		Date
Ed Yoon		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address		0 5 2 3 2 0 0 8 Amount
146 S Oxford Ave #1		
City	State Zip Code	472.58
Los Angeles	CA 90004	
Purpose of Expenditure	Category/	Office Sought: House State: NM
salary	Type	Senate X Senate District:
Name of Federal Candidate Supported or Oppose Steve Pearce	d by Expenditure:	President
Sieve i earce		Check One: Support X Oppose
Calendar Year-To-Date Per Election		Disbursement For: X Primary General
for Office Sought	21562.90	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Joshua Sabato		M M / D D / Y Y Y Y
Mailing Address		0.5 23 2008
611 Lead Ave SW #505		Amount
City	State Zip Code	236.34
Albuquerque	NM 87102	
Purpose of Expenditure	Category/	Office Sought: House State: NM
salary	Type	Senate X Senate District:
Name of Federal Candidate Supported or Oppose	d by Expenditure:	President Sistrict:
Steve Pearce		Check One: Support X Oppose
Calendar Year-To-Date Per Election		Disbursement For: X Primary General
for Office Sought	945.36	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
David Kirk		
Mailing Address		MO5 / P23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3017 Stevenson Place NW		Amount
City	State Zip Code	206.75
Washington	DC 20015	
Purpose of Expenditure	Category/	Office Sought: House State: NM
salary	Type	Senate X Senate District:
Name of Federal Candidate Supported or Oppose	d by Expenditure:	President
Steve Pearce		Check One: Support X Oppose
Calendar Year-To-Date Per Election		Disbursement For: X Primary General
for Office Sought	827.00	Other (specify)
(a) SUBTOTAL of Itemized Independent Expendit	ures	915.67
(b) SUBTOTALof Unitemized Independent Expen	ditures	
(c) TOTAL Independent Expenditures		
(carry total from last page forward to Li		

## Image# 28991193065 SCHEDULE 5-E

		J⁻L		
TFM17	FD INDF	PENDENT	<b>EXPENDI</b>	<b>FURES</b>

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full) DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee		Date		
Brian McGann		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address				
3908 Victoria Oaks Trail		Amount		
City State	Zip Code	147.66		
Annandale VA	22003			
Purpose of Expenditure	Category/	Office Sought: House State: NM		
salary	Туре	Senate X Senate District:		
Name of Federal Candidate Supported or Opposed by Expenditure: Steve Pearce		President		
Sieve redice		Check One: Support X Oppose		
Calendar Year-To-Date Per Election		Disbursement For: X Primary General		
for Office Sought	642.15	Other (specify)		
Full Name (Last, First, Middle Initial) of Payee Liam Flynn		Date		
•		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		
Mailing Address 283 Rimbley Ave		Amount		
City State	Zip Code	147.66		
Gahanna OH	43230			
Purpose of Expenditure	Category/	Office Sought: House State: NM		
salary	Type	Senate X Senate		
Name of Federal Candidate Supported or Opposed by Expenditure:		President District:		
Steve Pearce		Check One: Support X Oppose		
Calendar Year-To-Date Per Election		Disbursement For: X Primary General		
for Office Sought	590.64	2008 Other (specify)		
Full Name (Last, First, Middle Initial) of Payee		Date		
Ed Yoon		M M / D D / Y Y Y		
Mailing Address		0.5 23 2008		
611 Lead Ave SW #502		Amount		
City State	Zip Code	31.31		
Albuquerque NM	87102			
Purpose of Expenditure	Category/	Office Sought: House State: NM		
mileage	Type	Senate X Senate District:		
Name of Federal Candidate Supported or Opposed by Expenditure:		President		
Wilson Pearce		Check One: Support X Oppose		
Calendar Year-To-Date Per Election		Disbursement For: X Primary General		
for Office Sought	21562.90	Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures		326.63		
(1) 112 of terminous margoritating Exponential of				
(b) SUBTOTALof Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
(carry total from last page forward to Line 7)				

# Image# 28991193066 SCHEDULE 5-E

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MIZED INDEPENDENT EXPENDITURE	:5		FOR LINE 7 FOR FORM 5
ME OF FILER (In Full)			
EFENDERS OF WILDLIFE ACTION FUND	l		
			1
Full Name (Last, First, Middle Initial) of Payee Wild Bunch Consulting			Date
-			05 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2207 Valley Circle			Amount
·			1766.39
City	State	Zip Code	1700.33
Alexandria	VA	22302	
Purpose of Expenditure TV ad production expenses - Flip		Category/	Office Sought: House State: NM
		Туре	Senate X Senate District:
Name of Federal Candidate Supported or Opposed Steve Pearce	d by Expenditure	:	President District.
Otove i cardo			Check One: Support X Oppose
Calendar Year-To-Date Per Election			Disbursement For: X Primary General
for Office Sought		24599.20	Other (specify)
			<u> </u>
a) SUBTOTAL of Itemized Independent Expenditu	ıres		1766.39
(b) SUBTOTALof Unitemized Independent Expendent	ditures		
_, zarati			
	31.01.00		
(c) TOTAL Independent Expenditures			2009 60

(carry total from last page forward to Line 7)